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PTO/SB/97 (08-00)

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Application Number: 09/614,890


Filing Date: 7/12/2000

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1. Fee Transmittal
2. Petition for Extension of Time
3. Response to Office Action Dated 04/05/2005

Total pages including cover sheet: 34

MS1-587US  
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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**Effective on 12/08/2004**

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**Complete If Known**

Application Number	09/614,890
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Filing Date	7/12/2000
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First Named Inventor	Darko Kirovski
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Examiner Name	CARL G COLIN
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Art Unit	2136
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Attorney Docket No.	MS1 587US
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☐ Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 0.00
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## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing Fees		Search Fees		Examination Fees		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

### Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	50	=

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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                     - 3 or HP =                      x 200 =                       
HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

#### 4. OTHER FEE(S)

**Non-English Specification, \$130 fee (no small entity discount)**

**Other:**

SUBMITTED BY

**Signature**

Name (Print/Type)	Kasey C. Christie
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Registration No.  
(Attorney/Agent)

40559

**Telephone (509) 324-9256**

Date \_\_\_\_\_

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